

El Dorado County

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only

A Public Document PH12:12

Please type or print in ink.

NAME (LAST)	NAME (FIRST)	NAME (MIDDLE)	DAYTIME TELEPHONE NUMBER
Nutting	Raymond	James	
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE
			ZIP CODE
OPTIONAL: E-MAIL ADDRESS			

1. Office, Agency, or Court

Name of Office, Agency, or Court:

El Dorado County

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

District II Supervisor

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See Attachment

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ County of El Dorado

☐ City of

☒ Multi-County El Dorado County-Northern California

☐ Other

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: / /

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is / / through December 31, 2009.

☐ Leaving Office Date Left: / / (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is / / through the date of leaving office.

☐ Candidate Election Year: / /

4. Schedule Summary

► Total number of pages including this cover page: 10

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☒ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☒ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☒ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3-30-10

Signature

[Redacted Signature]

(File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Raymond James Nutting

▶ NAME OF BUSINESS ENTITY
Main Street Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

2901 Anderson Way, Placerville CA 95667

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Happy Valley Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

8421 Happy Valley Road, Somerset, CA 95684

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Main Street Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

50 Main Street, Placerville, CA 95667

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Forni Road Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Placerville, CA 95667

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Nutting Chiropractic Asset Management

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

50 Main Street, Placerville, CA 95667

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Angel Court Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

2001 Angel Court, Placerville, CA 95667

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Trustee**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 ____/____/09 ____/____/09
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Raymond James Nutting</u>

► 1. BUSINESS ENTITY OR TRUST

Dramatics Hair Studio

Name

3050 Sly Park Road, Pollock Pines, CA 95726

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION co-owner with spouse

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

APN 041-250-36-100

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Nutting Way, Grizzly Flats, CA 95684

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ ☐ Other _____
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments: co-owner with spouse

► 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION _____

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

APN 041-250-38-100

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Nutting Way, Grizzly Flats, CA 95684

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ ☐ Other _____
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Raymond James Nutting

► STREET ADDRESS OR PRECISE LOCATION
4972 Edgewood Circle
CITY
Grizzly Flats, CA 95684

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

ACQUIRED / / **09** DISPOSED / / **09**

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ Other
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Ryan Smiley

► STREET ADDRESS OR PRECISE LOCATION
8161 Happy Valley Road
CITY
Somerset, CA 95684

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

ACQUIRED / / **09** DISPOSED / / **09**

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ Other
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None _____
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None _____
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name [REDACTED]

► NAME OF SOURCE
Sierra @ Tahoe

ADDRESS (Business Address Acceptable)
1111 Sierra @ Tahoe Road, Twin Bridges CA 95735

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/24/09</u>	<u>\$ 280.00</u>	<u>4 Ski Lift Tickets</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Raymond James Nutting</u>

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**

<p>► NAME OF SOURCE <u>Regional Council of Rural Counties</u></p> <p>ADDRESS (Business Address Acceptable) <u>1215 K Street</u></p> <p>CITY AND STATE <u>Sacramento, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): <u>01</u>/<u>09</u> - ____/____/____ AMT: \$ <u>118.52</u> (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p>DESCRIPTION: <u>Annual Reception Dinner</u></p> <p>_____</p>	<p>► NAME OF SOURCE _____</p> <p>ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____ (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p>DESCRIPTION: _____</p> <p>_____</p>
<p>► NAME OF SOURCE _____</p> <p>ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____ (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p>DESCRIPTION: _____</p> <p>_____</p>	<p>► NAME OF SOURCE _____</p> <p>ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____ (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p>DESCRIPTION: _____</p> <p>_____</p>

Comments: _____

ATTACHMENT A -- EXPANDED STATEMENT

FORM 700 STATEMENT OF ECONOMIC INTEREST

Raymond J. Nutting
Elected Official

2009
Year

Name of Agency	Office/Position
Board of Supervisors	Member
Bond Authority	Member
Air Pollution Control Board	Member
Board of Equalization	Member
County Service Area #2 (CSA 2)	Member
County Service Area #3 (CSA 3)	Member
County Service Area #3 (CSA 5)	Member
County Service Area #7 (CSA 7)	Member
County Service Area #9 (CSA 9)	Member
County Service Area #10 (CSA 10)	Member
El Dorado County Public Housing Authority	
El Dorado County Redevelopment Agency	
Risk Management Authority	
Abandoned Vehicle Abatement Service JPA	
American River Authority	Alternate
California Identification Random Access Network	Member
California Rural Home Mortgage Finance Authority-Homebuyers Fund	Member
California State Association of Counties (CSAC)	
California Tahoe Conservancy	Alternate
Capital Southeast Connector Joint Powers Authority (Elk Grove-Rancho Cordova-El Dorado)	Alternate
Community Action Council	Member
El Dorado County Transportation Commission	Member
Transit Authority - El Dorado County	Alternate
El Dorado County Chamber of Commerce	Member
Environmental Services Joint Powers Authority	
Evelyn Horn Scholarship Commission	Alternate
First 5 El Dorado - Children and Families Commission	
Folsom City/El Dorado County Joint Powers Authority	Member
Golden Chain Council of Mother Lode Incorporated	
Golden Sierra Job Training Agency	
High Sierra Resource Conservation Council	Member
Local Agency Formation Commission (LAFCO)	Alternate
Local Enforcement Agency Independent Hearing Panel	Member
Mental Health Commission	
Mt. Counties Water Resources Agency	
Mt. Counties Air Basin Control Council	Alternate

	Name of Agency	Office/Position
	National Association of Counties (NACO)	Member
	Regional Council of Rural Counties (RCRC)	Member
	Sacramento Area Commerce & Trade Organization (SACTO)	
	Sacramento Area Council of Governments (SACOG)/Capitol Valley Regional Service Authority for Freeways and Expressways	Alternate
	Sac/Placerville Transportation Corridor JPA	
	Sacramento Sierra Valley Children's Health Initiative, Regional Governance Group	
	Sac/Mother Lode Regional Association of County Supervisors	
	Sierra Economic Development District Board (SEDD)	
	Sierra Planning Organization (SPO)	
	Sierra Nevada Conservancy	
	So. Lake Tahoe Basin Waste Management Authority	Alternate
	So. Lake Tahoe Recreation Facilities Joint Powers Authority	Alternate
	South Lake Tahoe Chamber of Commerce	Alternate
	Tahoe Conservancy	Alternate
	Tahoe Paradise Resort Improvement District	
	Tahoe Regional Planning Agency (TRPA)	Alternate
	Tahoe Transportation Authority	Alternate
	Veterans Coordinating Council	
	Water Purveyors/Water Agency Advisory	
	Water Agency – El Dorado County	
	Water and Power Joint Powers Authority – El Dorado County (EDWPA)	Member

Instructions: File ONE original signature Form 700, including this Expanded Statement, with the Elections Department.

Note: Organizations printed in **BOLD** involve out-of-county participation and will require a separate form with original signature be sent to each agency.


Signature of Elected Official

3-30-10
Date

List of Member Counties

El Dorado County
Sacramento County
Placer County
Yolo County
Sutter County
Yuba County

FPFC Form 700 "Statement of Economic Interest"
Out of County Agencies

American River Authority
c/o Placer County Water Agency
Attention: Barbara Sloan
P.O. Box 6570
Auburn, CA 95604

California Rural Home Mortgage Finance Authority

California State Association of Counties (CSAC)
1100 K Street, Suite 101
Sacramento, CA 95814-3914

Chula Vista-El Dorado-Livermore-Menlo Park
Mortgage Revenue Bonds Authority
County of El Dorado Administrative Office

Folsom City/EDC Joint Powers Authority
City of Folsom
Attention:

Golden Chain Council of Mother Lode, Inc.
P.O. Box 5142
Newcastle, CA 95658

Golden Sierra Job Training Agency
11549 F Avenue
DeWitt Center
Auburn, CA 95603

High Sierra Resource Conservation Council
251 Auburn Ravine #201
Auburn, CA 95603

Mountain Counties Water Resources Association
P.O. Box 667
San Andreas, CA 95249

Mountain Counties Air Basin Control Council
Placer County for 1998

Regional Council of Rural Counties (RCRC)
1020 12th Street, Suite 200-A
Sacramento, CA 95814

FPFC Form 700 - Out of County Agencies

Page 2

Sacramento Area Commerce & Trade Organization (SACTO)

300 Capital Mall, Suite 1210
Sacramento, CA 95814

Sacramento Area Council of Governments (SACOG)
3000 S Street, Suite 300
Sacramento, CA 95816

Sacramento/Placerville Transportation Corridor JPA
c/o Sacramento Regional Transit District
Attention: Kelly Breese
2811 O Street
Sacramento, CA 95816

Sacramento/Mother Lode Regional Association of County Supervisors

Sierra Economic Development District (SEDD)
Sierra Planning Organization
560 Wall Street, Suite K
Auburn, CA 95603

/ec 02/99